ENTRY BLAN	IK	HALI		# #	30
PLEASE TYPE	OR PRINT		ma	An	Lad
☐ Ms.		0 22 -	- ***		lip
Mr. Artist _	JIM	Y KOI	MA	YER (Last Na	mo Loct)
				(Last Na	ille Lasty
Permanent Address	607	S. COURT	ST	ME	DINA
, tad. 000	Street			City	
44256		Daytime Tel. (216)	72	3-43	35
Zip		Area Code			
Temporary or					
Studio Address					
OH Driv	Street L	Daytime Tel.()	54.	1893	
Zip		Area Code			
If you do not p	resently li	ve in one of the	countie	es of the	
Western Reser	ve, in which	h county were yo	u born'	?	
Collaborator _					
	(1	f Any)			
If May Show e	ntries are	not accepted or	not so	ld:	
Artist will p					
☐ Museum sh					
☐ Museum sh		to artist at artist'	s expe	ense	
to this ad	aress:				
Special Instruc	ctions				
When necessa	ry include	below instructio	ns or a	a drawing	of how
the object is to	be assem	nbled and display	/ed.		

This Entry blank must be fully made out and signed. Unsigned Entry Blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until June 29, 1986.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed in the Entry Information.

Signature

ON NOT DETACH

2 notes

THIS SECTION

REJECTED

156(1)

AMF

REJECTED